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| **TB CARE I**

# **Afghanistan**

**Year 1  
Quarterly Report  
July - September 2011**

**October 28th, 2011**

## Quarterly Overview

<b>Reporting Country</b>	<b>Afghanistan</b>
<b>Lead Partner</b>	<b>MSH</b>
<b>Collaborating Partners</b>	<b>KNCV, WHO</b>
<b>Date Report Sent</b>	26/10/2011
<b>From</b>	{Name and title}
<b>To</b>	{Name and title}
<b>Reporting Period</b>	<b>July-September 2011</b>

<b>Technical Areas</b>	<b>% Completion</b>
1. Universal and Early Access	47%
2. Laboratories	100%
3. Infection Control	20%
6. Health Systems Strengthening	67%
7. M&E, OR and Surveillance	100%
<b>Overall work plan completion</b>	<b>67%</b>

### Most Significant Achievements

**TB CAP transition to TB CARE I:** TB CAP project for Afghanistan completed on 30<sup>th</sup> June 2011 and smoothly transitioned to TB CARE I. All TB CAP staff committed to continue with TB CARE I with new scopes of work and titles. Under the new management of TB CARE I, the level of assistance to the National Tuberculosis Program (NTP) was extended and all staff shifted to the NTP. TB CARE I assists the NTP on DOTS expansion to urban and rural areas under Urban DOTS and Community Based DOTS (CB-DOTS). Furthermore, NTP will be assisted in field of infection control, M&E, OR and surveillance and health system strengthening. The CB-DOTS in all 13 provinces will be implemented by BRAC. TB CARE I developed the strategies for Urban DOTS, CB-DOTS, TB infection control, SOPs implementation, M&E, and surveillance aiming at assisting NTP to reach its strategic objectives. The implementation of these strategies will greatly help NTP in reaching its objectives of increasing suspect identification, examination and ensuring adherence to treatment.

**TB suspect management and case findings:** The suspect management in TB CARE I intervention areas had an upward trend over the past two quarters (see graph in sheet 6. Photo Album). In general, 57,000 TB suspects were identified in these provinces, and of them, 3,904 were sputum smear positive (positivity rate = 6.9%). 49% of all TB suspects identified in the country are attributable to 13/34 provinces and 52% of all new sputum smear positive TB cases identified over the past two quarters of 2011, are related to TB CARE I intervention areas.

**Refresher and initial training for health facility staff:** 46 health facility staff got refresher training and 36, from newly covered health facilities, were trained on SOPs for TB case detection, diagnosis, and treatment. In addition, 10 NTP staff was trained on new technology (utilization of LED microscopes).

#### **Community events:**

Community events aiming at increasing the awareness of TB and reducing stigma were conducted in Kabul city. During this period, four events for municipality labors, two school events, and one event for Ibn-Sina higher educational students were conducted. In total, 1,280 individuals attended these events and were oriented on the basic TB messages regarding TB suspect identification, free TB services, and that TB is a curable diseases. Moreover, the community events at community level was conducted by community health workers under CB-DOTS in TB CARE I intervention provinces.

#### **Tuberculosis infection control measures strengthened:**

Tuberculosis infection control measure was extended to an additional four public health facilities in Kabul city. TB CARE I/NTP extended its support to NTP on TB infection control. Four additional health facilities were covered by TBIC measures. The TBIC committees were established, the TBIC focal point was identified, and health facility staff assisted in developing the TBIC plan and integrating it into general IP plan.

**Quarterly review workshops conducted:**

NTP was assisted with conducting provincial quarterly review workshops in seven provinces. During these workshops 350 individuals attended. They were trained in basic data analysis, interpretation, and feedback. Each health facility identified their gaps and prepared action plan to address it within the new quarter. The findings from the workshop were also shared with NGOs and provincial health offices for further action by and follow up by them.

**Overall work plan implementation status**

TB CARE I is on the right track for APA1 work plan implementation. We have implemented most of the activities outlined in the plan. Thus, we are requesting one month no-cost extension to accomplish the remaining activities.

**Technical and administrative challenges**

Slow implementation of the activities because of Ramadan and Eid (Aug 2011) and insecurity in some of the provinces.

Deteriorating security limits TB CARE I and NTP staff to conduct visits to health facilities in the south and south east of the country.

Supervision/monitoring of 9,000 community health workers deep into community

Engagement of private hospitals in TB

## Quarterly Technical Outcome Report

Technical Area		1. Universal and Early Access						
Expected Outcomes		Outcome Indicators	Indicator Definition	Baseline	Target	Result	Highlights of the Quarter	Challenges and Next Steps to Reach the Target
					Y1	Y1		
1.1	Increased quality of TB services delivered among all care providers in Kabul	Number of new sputum smear positive TB cases diagnosed by Urban DOTS health facilities	New sputum smear positive TB cases detected by Urban DOTS health facilities (both public and private)	250 ( third quarter 2010)	300	NA	The data is expected to reach to NTP in Nov 2011	The only challenge for this indicator is delay in reporting to NTP. TB CARE I will introduce the electronic reporting system country wide as part of its APA2 work plan.
1.2	Increased quality of TB services delivered among all care providers in 13 provinces through CB DOTS	Number of new sputum smear positive TB cases out of TB suspects referred by CHWs	New sputum smear positive TB cases diagnosed out of all TB suspects referred by CHWs	232 (first quarter 2011)	467	NA	The data is expected to reach to NTP in Nov 2011	The only challenge for this indicator is delay in reporting to NTP. TB CARE I will introduce the electronic reporting system country wide as part of its APA2 work plan.
1.3	Increased demand for and use of high quality TB services and improve the satisfaction with TB services provided	Urban DOTS program implemented in Kabul city.	Number of health facilities implementing quality DOTS in Kabul City	53	65	53	46 ( 10 female and 36 male) urban health facility staff trained on SOPs for case detection, diagnosis and treatment, SOPs for TBIC, and pediatric SOPs as integrated package. In addition, 36 ( 28 male and 8 female) health facility staff by TB CARE local partner WHO.	The remaining staff will be trained till end of Oct 2011








Technical Area		2. Laboratories						
Expected Outcomes		Outcome Indicators	Indicator Definition	Baseline	Target	Result	Highlights of the Quarter	Challenges and Next Steps to Reach the Target
					Y1	Y1		
2.1	Ensured optimal use of new approaches (LED microscopes) in laboratory confirmation of TB and incorporation in selected reference labs	Number of reference labs at national and regional level using LED microscopes	Number of reference labs at national and regional level using LED microscopes	1	10	10	10 NTP staff trained on LED microscope utilization	Completed




Technical Area		3. Infection Control						
Expected Outcomes		Outcome Indicators	Indicator Definition	Baseline	Target	Result	Highlights of the Quarter	Challenges and Next Steps to Reach the Target
					Y1	Y1		
3.1	Scaled up implementation of TBIC strategies	Number of health facilities with a IC focal person, implementation plan, budget and monitoring system.	Number of health facilities with TB IC focal person identified and implementing IC plan.	20	40	35	The TB infection control measures expanded to new 15 health facilities.	Expand in APA 2




Technical Area		6. Health Systems Strengthening						
Expected Outcomes		Outcome Indicators	Indicator Definition	Baseline	Target Y1	Result Y1	Highlights of the Quarter	Challenges and Next Steps to Reach the Target
6.1	TB control components HRD formed integral part of national plan, strategies and service delivery	Percentage of quarterly planned supervisory visits conducted according to country supervision standards from: 1. central to province 2. province to district 3. district to health facility	Numerator: number of supervisory visits conducted and Denominator: total number of supervisory visits planned	50%	75%	75%	All the planned supervisory visits conducted. This was joint visits with NTP, PTC and NGOs to strengthen the coordination and feedback.	Completed
6.2	Ensured that TB control is embedded as a priority within the national health strategies and plans, with commensurate domestic financing and supported by the engagement of partners	Other coordinating mechanisms (TB task force) include TB civil society members and TB patient groups.	Number of TB task force meetings conducted out of total planned.	16	24	24	The coordinating meeting was conducted with ARCS, STP, TB task force, ACSM group meeting	Completed

Technical Area		7. M&E, OR and Surveillance						
Expected Outcomes		Outcome Indicators	Indicator Definition	Baseline	Target Y1	Result Y1	Highlights of the Quarter	Challenges and Next Steps to Reach the Target
7.1	Improved capacity of NTP to analyze and use quality data for management of the TB program	NTP provided regular feedback from systematic analysis of surveillance and programmatic data and related recommendations by central to lower levels	Number of provinces that develop quarterly review meetings and provide feedback.	7	7	7	All planned quarterly review workshops conducted in seven provinces. During these workshops health facility staff were trained on basic data analyses, interpretation and data utilization at local level	Completed: follow-up on decision and work plan implementation that was developed during QRW







## Quarterly Activity Plan Report


Outcomes	Outcome 1.1	1. Universal and Early Access	Lead Partner	Approved Budget	Cumulative Completion	Planned Completion		Cumulative Progress and Deliverables up-to-date
						Month	Year	
Increased quality of TB services delivered among all care providers in Kabul	1.1.1	Expand urban DOTS coverage to public and private health facilities	MSH	31,526	 0%	Nov	2011	There was no progress for this activity because of political conflict in the Kabul health directorate. This activity will be moved on to APA2
	1.1.2	Conduct initial/reresher training for health facility staff	MSH	4,820	 75%	Sep	2011	In total 46 individuals trained on SOPs for case detection and treatment from Urban health facilities in Kabul city. Training report
	1.1.3	Conduct supervisory and monitoring visits to Urban health facilities	MSH	9,000	 75%	Sep	2011	We had planned to conduct 40 visits to Kabul health facilities and achieve at 35 of the planned visits, while we reached the set
	1.1.4	Conduct community awareness events	MSH	15,240	 100%	Sep	2011	Urban DOTS managed to conduct all four community events planned in APA1 . Totally, 1280, individuals attended these
	1.1.5	Conduct Urban DOTS coordination	MSH	10,790	 0%			This was postponed to Oct 2010
Outcomes	Outcome 1.2		Lead Partner	Approved Budget	Cumulative Completion	Month	Year	Cumulative Progress and Deliverables up-to-date
Increased quality of TB services delivered among all care providers in 13 provinces through CB DOTS	1.2.1	Conduct monthly meetings/recognition of CHWs and orientation to CHWs	MSH	112,646	 75%	Sep	2011	95 out of 120 health facilities supervised (79%), 280 out of 377 (74%) health posts (448 CHWs) supervised by CHS', 2980 out of 3840 CHWs (78%) were supervised, 3293 out of 3840 (86%) CHWs attended the review meetings. 210 out of 616 (34%) of targeted new sputum smear positive TB cases identified. in summary,
	1.2.2	Improve/strengthening CHWs performance with recording and reporting	MSH	2,380	 0%			Postponed to Oct and it is in progress.




Outcomes	Outcome 1.3		Lead Partner	Approved Budget	Cumulative Completion	Month	Year	Cumulative Progress and Deliverables up-to-date
Increased demand for and use of high quality TB services and improve the satisfaction with TB services provided	1.3.1	Basic/initial Training for Kabul Urban DOTS Project (20 participants in 3 batches for 5 days)	WHO	15,820	 100%	Aug	2011	three batches of the training conducted by NTP with assistance from WHO.
	1.3.2	Fullfill gaps identified in Kabul Urban DOTS Project Review Workshop (2-3 projects @ 4000 per project)	WHO	15,461	 0%			Postponed to Nov 2011
					 47%			



		2. Laboratories				Planned Completion		
Outcomes	Outcome 2.1		Lead Partner	Approved Budget	Cumulative Completion	Month	Year	Cumulative Progress and Deliverables up-to-date
Ensured optimal use of new approaches (LED microscopes ) to the laboratory confirmation of TB and incorporation in selected reference labs	2.1.1	Conduct STTA to NTP on LED microscopy utilization	MSH	790	 100%	Sep	2011	This activity was coordinated with Cure international hospital here in Kabul and they trained all 10 individuals that planed, so we achieved all of them. The report is available.
	2.1.2	Conduct training for lab technicians on LED microscopy utilization	MSH	790	 100%	Sep	2011	10, individuals (1 Female and 9 Male) trained on LED micorscopes utilization. The reprot is available.
					 100%			



		3. Infection Control				Planned Completion		
Outcomes	Outcome 3.1		Lead Partner	Approved Budget	Cumulative Completion	Month	Year	Cumulative Progress and Deliverables up-to-date
Scaled up implementation of TBIC strategies	3.1.1	Expand TB IC coverage to additional health facilities in 19 provinces	MSH	3,640	 75%	Oct	2011	The TBIC committees was expanded to 15 new health facilities and we reached to 35/40 target. The report is available.
	3.1.2	Follow up of TB IC implementation	MSH	1,200	 25%	Sep	2011	we were only able to conduct this activity in 7/30 of health facilities. The minute is
	3.1.3	Monitor TB IC implementation	MSH	7,200	 0%			this postponed to Oct 2011
	3.1.4	Conduct orientation workshop	MSH	3,280	 0%			Postponed to Oct 2011
Outcomes	Outcome 3.2		Lead Partner	Approved Budget	Cumulative Completion	Month	Year	Cumulative Progress and Deliverables up-to-date
Improved TB IC human resources.	3.2.1	TA by TB IC/MDR consultant	KNCV	31,125	 0%			The consultant will be attending in Jan 2012
					 20%			

		6. Health Systems Strengthening				Planned Completion		
Outcomes	Outcome 6.1		Lead Partner	Approved Budget	Cumulative Completion	Month	Year	Cumulative Progress and Deliverables up-to-date
TB control components HRD formed integral part of national plan, strategies and service delivery	6.1.1	SOPs implementation monitoring visits and monitor appropriate utilization of TBIS database at provincial level	MSH	7,530	 100%	Sep	2011	All the visits planned were conducted through a joint visits to provinces and health facilities in all 13 USAID supported provinces. The visit reports are available.

Outcomes	Outcome 6.2		Lead Partner	Approved Budget	Cumulative Completion	Month	Year	Cumulative Progress and Deliverables up-to-date
Ensured that TB control is embedded as a priority within the national health strategies and plans, with commensurate domestic financing and supported by the engagement of partners	6.2.1	Conduct TB task force meeting	MSH	80	 100%	Sep	2011	This meeting was conducted as planned and the meeting minutes available. This is regular weekly/biweekly meetings conducted at NTP. This is the biggest decision making body in TB control program. The outcomes of this meetings are different and dependent on the Agenda e.g. NTP set criteria for who should attend the Union conference, TB CARE I suggested NTP to provide reagents for LED microscopes that were donated during TB CAP. The decision was that WHO would provide these reagents.
Outcomes	Outcome 6.3		Lead Partner	Approved Budget	Cumulative Completion	Month	Year	Cumulative Progress and Deliverables up-to-date
TB control components HRD formed integral part of national plans, strategies and service delivery of these components	6.3.1	TA by HRD consultant	KNCV	29,751	 0%	Dec	2011	This will happen in Dec 2011.
					 67%			

		7. M&E, OR and Surveillance				Planned Completion		
Outcomes	Outcome 7.1		Lead Partner	Approved Budget	Cumulative Completion	Month	Year	Cumulative Progress and Deliverables up-to-date
Improved capacity of NTP to analyze and use quality data for management of the TB program	7.1.1	Conduct quarterly review workshop at provincial level	MSH	38,922	 100%	Sep	2011	In total, 350 front line health care staff were trained on data collection, analysis and interpretation of previous quarter data. They identified the gaps and prepared a plan to address it during coming quarter. The provincial TB coordinator provided feedback on the performance of health facilities and shared the findings with the NGOs and PHD.
					 100%			

## Quarterly Activity Plan Modifications

Request for Cancellation or Discontinuation of Activities										
Approved By (write dates)			Old Code	1. Universal and Early Access	Lead Partner	Remaining Budget	New Code	Replace with the following activity (if any)	Lead Partner	Proposed Budget*
Mission	PMU	USAID		Activities from the Work Plan						
				{Copy from the work plan}						

\* Detailed budget is attached

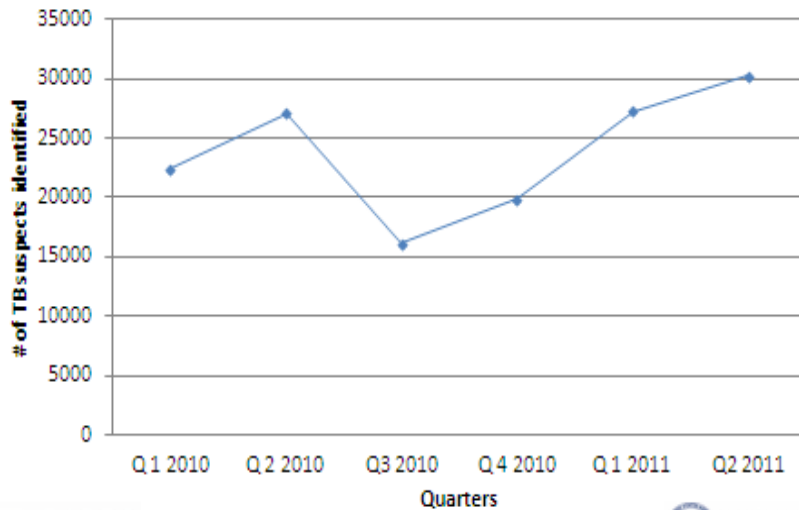
Request for Postponement of Activities to Next Year						
Approved By (write dates)			Old Code	1. Universal and Early Access Activities from the Work Plan	Lead Partner	Remaining Budget
Mission	PMU	USAID				
				Expand urban DOTS coverage to public and private health facilities	MSH	32,526
				training for remaining 24 urban health facility staff conducted in Kabul	MSH	
				Conduct Urban DOTS coordination	MSH	10,790
				Refresher training for Kabul Urban DOTS (20 participants in 2 batches for 3 days)	WHO	1,695
				Making and installing sputum collection points (12 points)	WHO	4,520
				Kabul Urban DOTS Project Review Workshop (2 days)	WHO	2,260
				Follow up of TB IC implementation	MSH	1,000
				Monitor TB IC implementation	MSH	2,000
				conduct orientation workshop	MSH	3,280
				TA by TB IC/MDR consultant	KNCV	31,126
				TA by HRD consultant	KNCV	29,751

Request for Adding New Activities to the Current Work Plan						
Approved By (write dates)			New	1. Universal and Early Access	Lead	Proposed
Mission	PMU	USAID	Code	Proposed New Activities	Partner	Budget*

\* Detailed budget is attached

## Quarterly Photos (as well as tables, charts and other releva

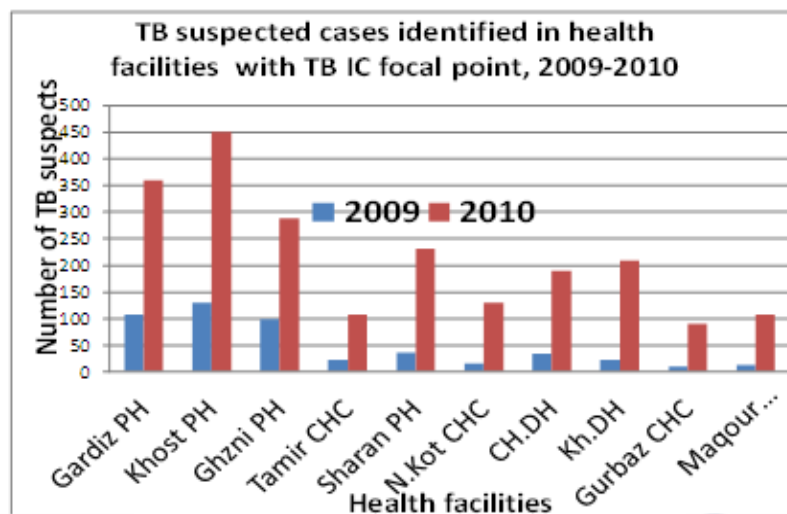
### Trend of TB suspects identification in TB CARE I intervention area 2010-2011



TB CARE I



### TBIC contribution to suspected case identification



TB CARE I



## List of TB CARE I indicators for year one Jul-Sep 2011

Indicator	Baseline	Target	Achievement	Remarks
Number of supervisory visits conducted	50%	75%	75%	
Number of TB task force meetings conducted out of total planned.	16	24	24	
Number of provinces that develop quarterly review meetings and provide feedback.	7	7	7	
Number of TB task force meetings conducted out of total planned.	16	24	24	
Number of health facilities with TB IC focal person identified and implementing IC plan.	20	40	35	
New sputum smear positive TB cases that detected by Urban DOTS health facilities (both public and private)	250 (third quarter 2010)	300	NA	
New sputum smear positive TB cases diagnosed out of all TB suspects referred by CHWs	232 (first quarter 2011)	467	NA	
Number of health facilities implementing quality DOTS in Kabul city	53	65	53	

TB CARE I





**The community event in Alfatha Private School 25, Aug 2011.**



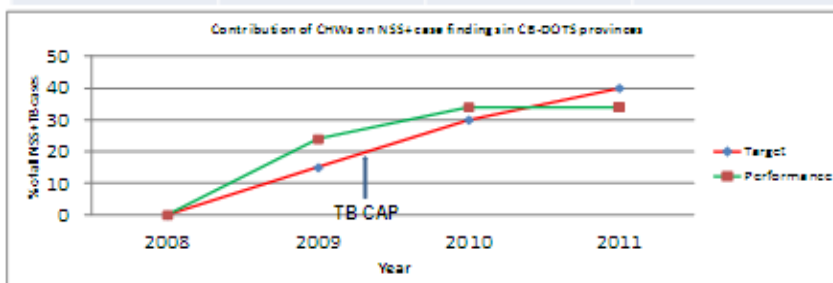


**Municipality Workers engaged in community awareness raising events conducted by TB CARE I in Kabul city 25, Aug, 2011**

ant materials)

## Role of CHWs in TB SS+ identification

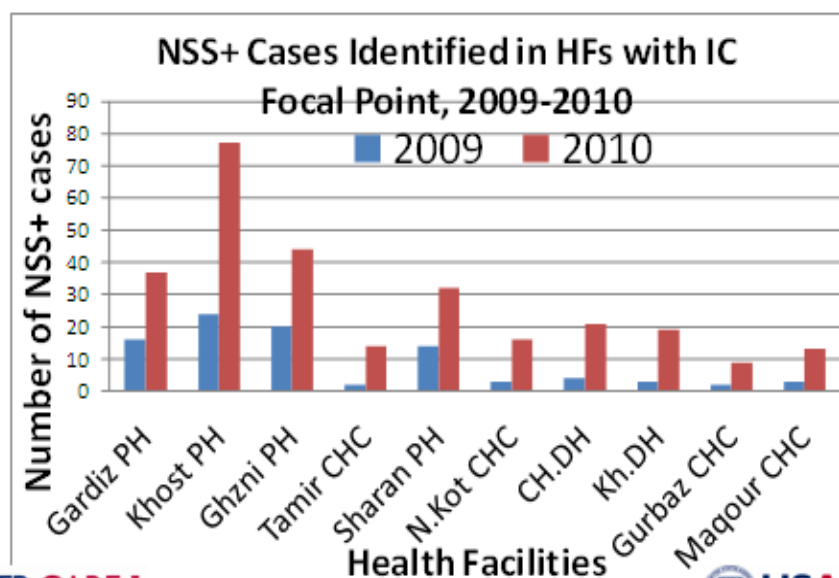
Year	No. of total SS+	No of SS+ ref. by CHWs	Percentage
2008	1,741	0	0%
2009	1,469	359	24%
2010	2,100	710	34%
2011 (six month)	944	310	34%



TB CARE I



## TBIC contribution to case detection



TB CARE I





**The Urban DOTS community event in Ibn Sina Higher Medical Institute**





**TB CARE I Country Director Delivering Speech during community event for Afghan Red Crescent Society.**



**Urban DOTS supervision and on the job training for Infectious hospital Kabul, Oct 11, 2011**

## Inventory List of Equipment TB CARE I

<b>Organization:</b>	<b>TB CARE I</b>
<b>Country:</b>	Afghanistan
<b>Reporting date:</b>	26-Oct
<b>Year:</b>	2011



Description (1)	ID numbers (2)	Acquisition date (3)	Acquisition cost (4)	V.A.T (5)	Location (6)	Condition (7)	Disposition date (8)	Title held by (9)	Insurance Policy #
Flash memory	NIL				TBCARE				
Mobile phone	355218-03-530777-5				TBCARE				
Computer, laptop	6432741424				TBCARE				
Desk table single	NIL				TBCARE				
Desk table single	NIL				TBCARE				
Screen, projection	NIL				TBCARE				
Desk	NIL				TBCARE				
Chair	NIL				TBCARE				
Chair	NIL				TBCARE				
Chair	NIL				TBCARE				
Chair	NIL				TBCARE				
Chair	NIL				TBCARE				
Chair	NIL				TBCARE				
Chair	NIL				TBCARE				
Chair	NIL				TBCARE				
Table	NIL				TBCARE				
Flash memory	NIL				TBCARE				
Flash memory	NIL				TBCARE				
Flash memory	NIL				TBCARE				

[illegible]

Chair	NIL				TBCARE				
Flash memory	NIL				TBCARE				
Stabilizer	NIL				TBCARE				
Stabilizer	NIL				TBCARE				
Flash memory	NIL				TBCARE				
Flash memory	NIL				TBCARE				
Flash memory	NIL				TBCARE				
Flash memory	NIL				TBCARE				
Flash memory	NIL				TBCARE				
Rug	NIL				TBCARE				
External Hard desk	NIL				TBCARE				
Camera	NIL				TBCARE				
Camera	NIL				TBCARE				
Camera	NIL				TBCARE				
Camera	NIL				TBCARE				
Camera	NIL				TBCARE				
Camera	NIL				TBCARE				
Printer	NIL				TBCARE				
Switch	07804901598				TBCARE				
UPS	080314-87730034				TBCARE				
Camera	1735831				TBCARE				
CDMA/for net	2009CP1510				TBCARE				
Mobile phone	352551-04-314834-1				TBCARE				
Mobile phone	354183-03-171154-8				TBCARE				
Mobile phone	354344-04-633544-8				TBCARE				
Mobile phone	355218-03-532795-5				TBCARE				
Mobile phone	355218035345940				TBCARE				
Mobile phone	355218-03-534666-6				TBCARE				
Mobile phone	358234-03-822657-0				TBCARE				
Mobile phone	358234-03-823553-0				TBCARE				
Mobile phone	359543-01-625586-7				TBCARE				
Scanner	CN81VTR10s				TBCARE				
Switch	CSV01HB34964				TBCARE				
Mobile phone	IMEI:352912/02/445 364/9				TBCARE				
CDMA/for net	KT7AAB1920801171				TBCARE				
CDMA/for net	KTAB10961900183				TBCARE				
UPS	NIL				TBCARE				
UPS	NIL				TBCARE				
Flash memory	NIL				TBCARE				
Flash memory	NIL				TBCARE				
External Hard desk	WX61A60E2961T				TBCARE				
External Hard desk	WX71C50L5029T				TBCARE				



[illegible]

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Chair	NIL				TBCARE-NTP				
Chair	NIL				TBCARE-NTP				
Chair	NIL				TBCARE-NTP				
Monitor	NIL				TBCARE-NTP				
Stabilizer	NIL				TBCARE-NTP				
Other	NIL				TBCARE-NTP				
Stabilizer	NIL				TBCARE-NTP				
Stabilizer	NIL				TBCARE-NTP				
Stabilizer	NIL				TBCARE-NTP				
Stabilizer	NIL				TBCARE-NTP				
Table	NIL				TBCARE-NTP				
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Table	NIL				TBCARE-NTP				
Table	NIL				TBCARE-NTP				
Amplifier	1150916				TBCARE-NTP				
Computer, laptop	28172057968				TBCARE-NTP				
LCD projector	7078356-M				TBCARE-NTP				
Computer, desktop	BP8DY1S				TBCARE-NTP				
Scanner	CN84JTRO2P				TBCARE-NTP				
Printer	CNC1JO2222				TBCARE-NTP				
Printer	CNFY136195				TBCARE-NTP				
Monitor	CN-OG349H-64180-88T3GAL				TBCARE-NTP				
Monitor	CN-OG349H-64180-894-1HLL				TBCARE-NTP				
Computer, desktop	GYKDY1S				TBCARE-NTP				
Photo Copy machine	MWM58971				TBCARE-NTP				
LCD projector	S01-7079009-1				TBCARE-NTP				
Air conditioner	Y2KEPACZB00117				TBCARE-NTP				
Air conditioner	Y2KEPAKZB00073				TBCARE-NTP				
Fan	NIL				TBCARE-NTP				

Monitor	AQ15HDBT71235713				TBCARE-NTP				
Monitor	CN330XY468				TBCARE-NTP				
Monitor	CN330XY554				TBCARE-NTP				
Monitor	CN330XY638				TBCARE-NTP				
Monitor	CX000504793740				TBCARE-NTP				
Computer, desktop	SGH3390BHH				TBCARE-NTP				
Monitor	AQ15HDBT914050E				TBCARE-NTP				
Monitor	CX000447243410				TBCARE-NTP				
Monitor	CX000504782555				TBCARE-NTP				
Monitor	CX000505842266				TBCARE-NTP				
Computer, desktop	SGH3390BGL				TBCARE-NTP				
Computer, desktop	SGH3390BGZ				TBCARE-NTP				
Computer, desktop	SGH3390BH6				TBCARE-NTP				
Computer, desktop	SGH3390BH9				TBCARE-NTP				
Computer, desktop	SGH3390BJ5				TBCARE-NTP				
Computer, desktop	SGH3390BJB				TBCARE-NTP				
Computer, desktop	SGH390BGP				TBCARE-NTP				
Desktop computer					TBCARE-NTP				
motor Bike	20082925				BRAC				
Motor Bike	20082936				BRAC				
MotorBike	20083069				BRAC				
Motor Bike	20083109				BRAC				
Microscope	9G81006				BRAC				
Microscope	9G81039				BRAC				
Scanner	CN87HTO3N				13 USAID provinces				
Printer	CNCIJO1907				14 USAID provinces				
Computer, laptop	CN-OHN338-48643-8BS-0350				15 USAID provinces				
Stabilizer	SVC-2000 VA				16 USAID provinces				
Stabilizer	NIL				17 USAID provinces				
Scanner	CN869THO82				18 USAID provinces				
Printer	CNC1JOO793				19 USAID provinces				
Computer, laptop	CN-OHN338-48643-8BS-0446				20 USAID provinces				
Scanner	CN85DTHOCN				21 USAID provinces				
Printer	CNCIJO0723				22 USAID provinces				
Computer, laptop	CN-OHN338-48643-8BS-0029				23 USAID provinces				
Stabilizer	SVC-2000 VA				24 USAID provinces				
Stabilizer	NIL				25 USAID provinces				
Scanner	CN86KTHIVT				26 USAID provinces				
Printer	CNC1J00796				27 USAID provinces				

Computer, laptop	CN-OHN338-48643-8BS-0473				28 USAID provinces				
Stabilizer	NIL				29 USAID provinces				
Computer, laptop	13203320176				30 USAID provinces				
Scanner	CN86BTH07J				31 USAID provinces				
Printer	CNC1JO1884				32 USAID provinces				
Scanner	CN87RT1103				33 USAID provinces				
Printer	CNCI300747				34 USAID provinces				
Computer, laptop	CN-OHN338-48643-8BS-0281				35 USAID provinces				
Stabilizer	SVC-2000 VA				36 USAID provinces				
Stabilizer	NIL				37 USAID provinces				
Computer, laptop	17288146288				38 USAID provinces				
Scanner	CN856THIFH				39 USAID provinces				
Printer	CNC1JO2218				40 USAID provinces				
Stabilizer	NIL				41 USAID provinces				
Scanner	CN86BTH12P				42 USAID provinces				
Printer	CNC1JOO815				43 USAID provinces				
Computer, laptop	CN-OHN338-48643-8BS-0243				44 USAID provinces				
Computer, laptop	CN-OHN338-48643-8BS-0299				45 USAID provinces				
Stabilizer	NIL				46 USAID provinces				
Computer, laptop	12963088432				47 USAID provinces				
Scanner	CN86KTHWQ				48 USAID provinces				
Printer	CNC1JO1897				49 USAID provinces				
Stabilizer	NIL				50 USAID provinces				
Computer, laptop	32854827376				51 USAID provinces				
Computer, laptop	43317108784				52 USAID provinces				
Scanner	CN86KTHIS3				53 USAID provinces				
Scanner	CN87HTHIHY				54 USAID provinces				
Printer	CNC1J00812				55 USAID provinces				
Printer	CNC1JOO824				56 USAID provinces				
Stabilizer	SVC 2000VA				57 USAID provinces				
Stabilizer	NIL				58 USAID provinces				
Scanner	CN86BTHOOT				59 USAID provinces				
Printer	CNC1JOO743				60 USAID provinces				
Computer, laptop	CN-OHN338-48643-8BS-0279				61 USAID provinces				
Microscope	9G81000				AADA				
Microscope	9G81003				AADA				
Microscope	9G81207				AADA				
Microscope	9G81211				AADA				

Microscope	9G81215				AADA				
Microscope	9G81235				AADA				
Microscope	9G81239				AADA				
Microscope	9G81242				AADA				
Microscope	9G81250				AADA				
Microscope	9G81251				AADA				
Microscope	9G81255				AADA				
Microscope	9G81258				AADA				
Microscope	9G81022				AKHS				
Microscope	9G81024				AKHS				
Microscope	9G81206				AKHS				
Microscope	9G81247				AKHS				
Microscope	9G81256				AKHS				
Microscope	9G81304				AKHS				
Microscope	9G81237				AHDS				
Microscope	9G81253				AHDS				
Microscope	9G81301				AHDS				
Microscope	9G80999				BDN				
Microscope	9G81012				BDN				
Microscope	9G81216				BDN				
Microscope	9G81244				BDN				
Microscope	9G81245				BDN				
Microscope	9G81248				BDN				
Microscope	9G81302				BDN				
Microscope	9G81005				CAF				
Microscope	9G81026				CAF				
Microscope	9G812110				CAF				
Microscope	9G81212				HealthNet				
Microscope	9G81246				HealthNet				
Microscope	9G81210				IMC				
Microscope	9G81303				IMC				
Microscope	9G81241				SDO				